

**BEST AVAILABLE COPY**

<b>CLAIMS ONLY</b>						SERIAL NO.		FILING DATE				
						APPLICANT(S)						
						<b>CLAIMS</b>						
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			*		*		
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TOTAL DEP.			↓			↓			↓			
TOTAL CLAIMS			↓			↓			↓			

  

						SERIAL NO.		FILING DATE			
						APPLICANT(S)					
						<b>CLAIMS</b>					
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TOTAL IND.			↓			↓			↓		
TOTAL DEP.			↓			↓			↓		
TOTAL CLAIMS			↓			↓			↓		

\* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS